

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

CROSSLAND FOR CONGRESS

ADDRESS (number and street)  
▼

337 E BRAMBLE CIR

Check if different  
than previously  
reported. (ACC)

AKRON

OH

44321

2. FEC IDENTIFICATION NUMBER ▼

C

C00558981

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

OH

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Debra L Deane

Signature of Treasurer

Debra L Deane

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 11 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

**CROSSLAND FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5990.00	5990.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	5990.00	5990.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	283.45	283.45
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	283.45	283.45
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	5706.55	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 10

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**CROSSLAND FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

850.00

850.00

(ii) Unitemized.....

4140.00

4140.00

(iii) TOTAL of contributions from individuals ▶

4990.00

4990.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

1000.00

1000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

5990.00

5990.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

5990.00

5990.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	283.45	283.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	283.45	283.45

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5990.00
25. SUBTOTAL (add Line 23 and Line 24).....	5990.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	283.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5706.55

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 10  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CROSSLAND FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mary Joanne Arnold</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 624 Island View St			<b>Transaction ID : SA11AI.4154</b>	
City	State	Zip Code		
Fillmore	CA	93015-1432		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 300.00	
Name of Employer none		Occupation retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Carole Begala</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 266 Parkside Dr			<b>Transaction ID : SA11AI.4146</b>	
City	State	Zip Code		
Bay Village	OH	44140		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer none		Occupation artist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ardith Keck</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 754 Delaware Ave			<b>Transaction ID : SA11AI.4187</b>	
City	State	Zip Code		
Akron	OH	44303		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 300.00	
Name of Employer none		Occupation homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			850.00	
<b>TOTAL</b> This Period (last page this line number only).....			850.00	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 10

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**CROSSLAND FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>AMERICA WORKS PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		21		2014	
M M	/	D D	/	Y Y Y Y										
03		21		2014										
Mailing Address PO BOX 15293		<b>Transaction ID : SA11C.4198</b>												
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>											1000.00
										1000.00				
FEC ID number of contributing federal political committee. <b>C</b> C00331694														
Name of Employer 		Occupation 												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>												1000.00
										1000.00				
<b>B.</b> Full Name (Last, First, Middle Initial) 		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y						
M M	/	D D	/	Y Y Y Y										
Mailing Address 														
City 	State 	Zip Code 	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <b>C</b>														
Name of Employer 		Occupation 												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												
<b>C.</b> Full Name (Last, First, Middle Initial) 		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y						
M M	/	D D	/	Y Y Y Y										
Mailing Address 														
City 	State 	Zip Code 	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <b>C</b>														
Name of Employer 		Occupation 												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>												1000.00
										1000.00				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> <td>1000.00</td> </tr> </table>												1000.00
										1000.00				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)  
**CROSSLAND FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PETE CROSSLAND</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 337 E BRAMBLE CIR		<b>Transaction ID : SA11D.4222</b>	
City AKRON	State OH	Zip Code 44321	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C H4OH16115		In-kind - Post office box (2/7/14-1/31/15)	
Name of Employer none	Occupation retired		<b>[MEMO ITEM]</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		0.00	
<b>TOTAL</b> This Period (last page this line number only).....		0.00	

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11D  
Transaction ID : SA11D.4222

Candidate paid for P.O. Box for campaign from personal funds. In-kind; will not be reimbursed.

Form/Schedule:  
Transaction ID:





: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.4223

In-kind from Candidate for PO Box; Vendor: Fairlawn Post Office, Akron, OH 44333-9998

Form/Schedule:

Transaction ID: